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to a collection of information unless it displays a valid OMB control and the control and th Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a

PATEN	Applic	Application of Docket Number						
Substitute for Form PTO-875  CLAIMS AS FILED = PART I  (Column 1) (Column 2)					ALL ENTITY	OR	OTHER THAN SMALL ENTITY	
FOR NUMBER			IBER EXTRA	7			OWNE	1
BASIC FEE (37 CFR 1.16(a))		1 11011	·	RATE	\$385.6	<del>,</del>	RATE	FEE
TOTAL CLAIMS (37 CFR 1.16(c))				x \$ 9.00		OR	100	\$770.0
INDEPENDENT CLAIMS	minus	20 =   -		1		OR	× \$ 18.0=	ļ
(37 CFR 1.16(b))	mlnus	3 = 1		× 543.	.=	OR	× \$ 86.0=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ \$ 145	2	OR	+ <u>s</u> 29 <u>0</u> , 2		
* If the difference in column 1 is less than zero, enter "0" in column 2.				TOTAL		OR	TOTAL	
CLAIMS AS AMENDED PART II								
(Column 1) (Column 2) (Column 3)			SMĄ	LL ENTITY	OR	OTHER SMALL		
Z 3. do	CLAIMS EMAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
Total (37 CFR 1.16(c))	8 Minus	"AD	,	x \$ 9			× \$/8 =	FEE
Z Independent * (37 CFR 1.16(b))	Minus	··· 3	-	x s 43	_	OR	× \$ 86 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				1.145		OR	+ \$29D=	
				TOTAL ADD'L FE	<u> </u>	OR OR	+ \$oCIO = TOTAL ADD'L FEE	
	olumn 1)	(Column 2)	(Column 3)				•	
50,30.0 RE	CLAIMS MAINING AFTER ENDMENT Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
(37 CFR 1.16(c))	) Minus	<u> </u>		x \$ <u>9</u>	<u>-</u>	OR	× s/8 =	
Ш (37 CFR 1.16(b)) ≥	ivinus ivinus	$\Box$		x \$43	<u> </u>	OR	× \$ 86 =	
FIRST PRESENTATION	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					ÓR	+ \$290=	
				TOTAL ADD'L FEE		OR L	TOTAL ADD'L FEE	
(Co	lumn 1)	(Column 2)	(Column 3)		<u> </u>			
REI A A AME	LAIMS MAINING JETER NDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
Total (37 CFR 1.16(c))	Minus	**	2	× \$ 9 =			x . 18 -	FEE
Z Independent (37 CFR 1.16(b))	Minus	***	=	× \$ 43=		OR OR	× \$ 810 =	<del></del>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						OR -	1,290	
* If the entry in each		,	<del></del>	TOTAL ADD'L FEE		<u>.                                    </u>	TOTAL ADD'L FEE	
<ul> <li>If the entry in column</li> <li>If the "Highest Number</li> <li>If the "Highest Number The "Highest Number It</li> </ul>	r Previously Paid For" Previously Paid For" t	IN THIS SPACE I	s less than 20, er	. #0#	n the appropriate	box in col		

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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of a collection of information uples it disculpage a collection of information uples.

PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875							ion or Docket Number.		
, CL	SMALL	. ENTITY	OR		R THAN ENTITY				
FOR NUMBER FILED		NUME	NUMBER EXTRA		FEE	]	RATE	FEE	
BASIC FEE (37 CFR 1.16(a))				\$385.0	OR		\$770.0		
TOTAL CLAIMS (37 CFR 1.16(c))  minus 20 =		x \$9.0 =	132.0	1	× \$18.0=	3_7.70.			
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus		***	× \$43.0=		OR	x \$ 86.0=	:	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ s/45 <sup>D</sup> =	<del>-</del>	OR OR	+ \$290, =		
* If the difference in column	TOTAL	1	OR	TOTAL					
CLAIMS	rome	<u> </u>	1 OK	TOTAL					
(Col	SMALL	ENTITY	OR	OTHER SMALL					
N. A.DO REM	LAIMS MAINING IFTER NOMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total (37 CFR 1.16(c))	Minus	"dO	=	x s 9 =		OR :	× \$/8 =		
Z Independent (37 CFR 1.16(b))	Minus	<sup></sup> 3	=	× s 43 =		OR	x \$ 86 =		
FIRST PRESENTATION (	+ \$145 =		OR	+ \$29D=					
			·	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
· · · · · · · · · · · · · · · · · · ·	umn 1)	(Column 2)	(Column 3)						
Total (37 CFR 1.16(c)) Independent	AIMS IAINING FTER RIDMENT Minus Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE x \$ 9 =	ADDI- TIONAL FEE	OR	RATE  x \$ \int \frac{1}{2} =	ADDI- TIONAL FEE	
☐ (37 CFR 1.16(b))	1			x s/ <del>1</del> /2 =		OR	x \$ 86 =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ 45 =		OR	+ <u>\$290</u> =		
				ADD'L FEE		OR	ADD'L FEE		
	imn 1)	(Column 2)	(Column 3)	<del></del>		<b>-</b> -			
E S. Lo. D	AIMS AINING TER DMENT Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE	
Z Independent (37 CFR 1.16(b))	Minus	" 3	=	x \$ 43=	<u></u>	OR I	× \$86 =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ s/45 =	<u> </u>	OR _	+ \$290=		
				TOTAL ADD'L FEE		L	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.									

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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